

BULLETIN

Indexed

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Architect's rendering shows Barnes' Clayton skilled nursing facility, expected to be completed in April 1990.

Groundbreaking slated for two Barnes SNFs

Final design is nearing completion and groundbreaking dates have been targeted for construction of Barnes' skilled nursing facilities (SNFs) in Clayton and in Chesterfield.

The 120-bed Chesterfield SNF will be part of a retirement community on Olive Street Road. Construction is scheduled to begin in March 1989, with completion expected in March 1990.

Kim Williams, Barnes SNF director, who has overseen development of plans for the two facilities, said that Barnes chose to affiliate with Life Care Affiliates, Inc., to develop residential units at the Chesterfield site. "This will provide a complete retirement community, including one-, two- and three-bedroom apartments in an independent living facility designed for healthy active retirees, as well as an assisted living facility designed for persons requiring additional personal assistance to live in an apartment setting."

The Clayton SNF, also 120 beds, will be part of the development on the former St. Louis County Hospital site on Brentwood Boulevard in Clayton and will occupy approximately two acres of the 23-acre development, which will also include commercial office space. Groundbreaking is scheduled for April 1989 with completion anticipated in April 1990.

Each facility will provide both skilled nursing care and intermediate care. Mr. Williams said opening of the two nursing facilities will be "a significant step in Barnes' efforts to provide a

continuum of care to assure optimum care for our patients."

The facilities will provide 24-hour routine nursing care under the supervision of professional nurses and under the medical direction of a physician. Services will include skilled nursing care, physical therapy, speech therapy, occupational therapy, a pharmacy, a laboratory and respiratory therapy, as well as ophthalmology, dental and podiatry services. A full range of activity and social services also will be included.

"All programs will emphasize restorative and rehabilitative care designed to meet the physical, social and spiritual needs of the elderly residents," Mr. Williams said.

Stalnaker honored with career achievement award

Armand Stalnaker, chairman of the Barnes board of directors, was among three business leaders honored by the *St. Louis Business Journal* January 25 at the Washington University business school. Mr. Stalnaker was recognized for his lifetime record of achievement and leadership in the St. Louis area.

Guided by a fundamental personal business philosophy of "being tough about results and tender with people," Mr. Stalnaker first made his mark on the St. Louis business community in 1963, when he relocated to the area as an administrative vice-president at General American Life Insurance Company. In subsequent years, he was named president, chief executive officer and chairman of the board there.

Over the years, he became further involved in the St. Louis community as chairman of the board of eight organizations, including the Regional Commerce and Growth Association and the American Council of Life Insurance; and as a board member of 13 others, including



Armand Stalnaker

Brown Group, Inc. and Washington University. He received the Globe-Democrat Man of the Year in St. Louis Award in 1978 and the Right Arm of St. Louis Award in 1981.

Mr. Stalnaker joined the Barnes board of directors in 1976 and was elected chairman in 1985. He's also currently a professor of management at Washington University and a board member of Anheuser-Busch Cos., General American Life Insurance Company and six other businesses or civic organizations.

Along with Mr. Stalnaker, W. R. "Buck" Persons, former chairman and chief executive officer of Emerson Electric Company; the late David R. Calhoun, who headed St. Louis Union Trust; and Laclede Steel Company, represented by chief executive officer John McKinney, were honored at the ceremony.

New affiliation expands Barnes' psychiatry service

Providing expanded services to adult psychiatric outpatients is the goal of an affiliation begun in January between Barnes Hospital and Independence Center, a not-for-profit psychiatric rehabilitation facility in St. Louis. The center's goal is to help persistently mentally ill persons achieve a successful community adjustment.

Staffed by social workers, clinical psychologists and rehabilitation counselors, Independence Center offers pre-vocational day programs, comprehensive employment opportunities, recreation and education services to psychiatric patients in a non-institutional, community setting. "This affiliation enables us to refer our patients to the center to take advantage of unique rehabilitation programs and services previously not available to them," said director of Barnes psychiatry services Mike Fitzgerald.

Mr. Fitzgerald added, "Through Independence Center, which already has a vast network of

(continued on page 2)

Front cover: The thoracic surgery nursing division moved to newly renovated quarters on the sixth floor of Rand-Johnson last month. The renovation, funded by a pledge from the Barnes Hospital Auxiliary, creates a division exclusively for the care of the thoracic surgery patients, including lung transplant recipients.

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ARCHIVES

Independence Center

(continued from page 1)



Present for the signing of the Independence Center agreement were (from left) Barnes vice-president for nursing Sherlyn Hailstone; and, from Independence Center, board member Susan Hecker; executive director Robert Harvey; and board president H.S. Taylor Rodgers.

community-based psychiatric programs in place, we hope to reach out to other mentally ill persons in this area who currently are not receiving any help."

Established in 1981 by parents and friends of persistently mentally ill persons, the center maintains a board of directors separate from Barnes' and produces various fundraising events to help generate financial support for its services. Barnes coordinates all Medicare billing for the center and oversees the programs.

"Although Independence Center enjoys a national reputation and considerable local support, we believe the center will gain even more recognition through its association with Barnes," Mr. Fitzgerald said.

Independence Center is located at 4380 West Pine Blvd.

HCFA mortality figures: part of bigger picture

In releasing Medicare mortality rates December 16, officials of both the Health Care Financing Administration and hospitals cautioned that the figures are only one ingredient in measuring quality of care.

"The fact that Barnes' mortality rate is below the expected range is certainly important and an affirmation of the quality of care patients receive here," said Marlene Hartmann, Barnes senior vice-president. However, the quality of care is best measured by a comprehensive quality assurance program that reviews multiple quality indicators on a regular basis."

Dr. William Roper, administrator of HCFA, the agency that manages the Medicare program, said the data "is not necessarily representative of a hospital's total performance in all aspects of patient care." The rates are based on deaths of Medicare patients within 30 days of their admission, regardless of whether the death was related to the condition for which the patient was being treated. Expected mortality ranges are based in part on the type of patient and acuity index for each hospital.

Dr. William Owens, chairman of the Medical Advisory Committee and a member of Barnes'

quality assurance committee, said that an 8 percent figure at a hospital that admits patients who are less sick and who require relatively simple procedures is not equivalent to the same rate at a referral center where more complex cases are routine. He and Ms. Hartmann pointed out that the nation's premier teaching hospitals, such as Barnes, which is associated with Washington University School of Medicine, have a depth of resources to provide superior care of so-called routine problems because of the breadth and depth of expertise in complex problems.

Dr. Owens suggested additional ways a patient can determine quality in choosing a hospital:

1. Check that the hospital has a bona fide quality assurance program that is closely monitored by an active quality assurance committee.
2. Inquire about how much experience your doctor has with the specific procedure you require.
3. Check credentials of medical, nursing and other hospital staff: Are doctors board-certified in the appropriate specialty? Are specially trained nurses available? Is a qualified doctor on the floor day and night? Is there patient education? Are other support services in place, including social workers, therapists, etc.?
4. Don't hesitate to get second opinions; don't hesitate to ask tough questions.
5. Remember the choice of doctor and hospital is yours; don't let someone else make it for you.

HOSPITAL	Medicare Patients	Mortality Rate (%)	Expected Mortality Range (%)
Barnes	7,735	8	9-13
Christian NE	4,476	14	12-15
Deaconess	4,237	14	12-16
DePaul	3,067	10	8-12
Incarnate Word	2,093	13	10-15
Jewish	4,094	10	11-15
Missouri Baptist	3,084	9	9-13
St. Anthony's	3,655	13	11-14
St. John's Mercy	4,007	10	10-13
St. Joseph, St. Charles	2,000	13	11-15
St. Joseph, Kirkwood	2,597	12	10-15
St. Luke's	3,090	9	9-13
St. Mary's	4,124	11	10-14
St. Louis University	2,521	12	10-14

Listed above is HCFA information for St. Louis area hospitals treating 2,000 or more Medicare patients in a year. The last column is the expected mortality predicted by HCFA for the specific hospital, taking into consideration its mix of patients.

Employee retirements

Five long-term employees recently retired with a combined total of 134 years of service to the hospital. Ruth Azerolo, admitting; Ethel Grauer, clinics; Anna Hall, housekeeping; Glenn Noser, plant engineering; and Ethel Stephenson, nursing, each received a certificate of appreciation from hospital president Max Poll at receptions in their honor.

Mrs. Azerolo joined Barnes in 1964 as an interviewer in admitting. "I spent my whole career in this job and I really loved it," she said. "I enjoyed working with the patients and all the wonderful people in this department. I'll really miss all of my friends here." Mrs. Azerolo plans to rest for



several weeks but also plans to travel extensively with her husband. "We are both very interested in genealogy and look forward to tracing our family history. I'm sure that will take us to various parts of the country." Visiting Civil War battlefields is also a priority for the couple. Mrs. Azerolo, who is the mother of two children and grandmother of four, promised to come back and "see how everyone is getting along without me."

After 22 years as a registered nurse in the otolaryngology clinic, Mrs. Grauer is looking forward to spending more time tending her garden on her Glencoe, Missouri, farm. "I love to be out in my fields, taking care of the land," she said. Mrs. Grauer said she'll miss her friends at Barnes, however. "Everyone I worked with was wonderful. I don't think there was a day of my career that I didn't enjoy." Her retirement travel plans include visiting her family in Virginia and a sightseeing tour in Alaska. "I won't be too busy to come back and see all of my friends here," she said.



Mrs. Hall spent her 16-year tenure with the hospital working on the night shift as a housekeeper. "Coming to Barnes was one of the smartest moves I ever made. I wasn't here that long, but the years here were wonderful," she said. "Barnes has changed so much just since I joined in 1972. The West Pavilion wasn't even here then." After resting for a few weeks, Mrs. Hall plans to visit her brother in Arkansas. "I'm an avid fisherman so I'll probably throw in a line down there, if it's not too cold." She also plans to devote more time to her six children, five grandchildren and two great-grandchildren.



Mrs. Stephenson has been a unit aide since she joined the hospital in 1951. "There have been a lot of changes here since that time, but I really don't spend much time thinking about how things used to be. I'm a person who always looks to the future." She said her first job, though, was taking patients' temperatures and making beds. As a person who looks to the future, she said she is excited about the rest of her life. "I'll be involved in charity work such as the Meals on Wheels program. I've wanted to join some of the committees at my church for a long time. Now I'll have the time to do it."



Mr. Noser, who joined Barnes in 1954, began his career in the paint department of plant engineering and retired as head of painting. "The other painters and I had wonderful times working together over the years. That's what I'm going to miss most about the hospital," he said. Mr. Noser plans to spend a lot more time hunting and fishing in Bonne Terre, where he owns property and a mobile home. "My children and grandchildren all live here in St. Louis. They'll be seeing a lot more of me during the coming years!" he said.



Keep 'Pill' findings in perspective, doctors say

A preliminary report from Boston linking oral contraceptives and an increased risk of breast cancer created a flurry of news headlines last month that raised a specter of fear about the most convenient and reliable form of birth control available today. But specialists at Barnes have agreed with the conclusion of a Food and Drug Administration (FDA) advisory panel that the evidence is too slim to warrant changes in the way oral contraceptives are prescribed or labeled, citing numerous earlier studies that did not find an association between the Pill and breast cancer.

The study creating the stir was based on a comparison of 400 women who used the Pill and 400 who didn't, with the breast cancer risk for users of less than 10 years increasing twofold, and more than 10 years increasing fourfold. A recent British study also was cited, in which the records of some 47,000 women—both users and nonusers—were compared. Differences were found only in the 30- to 34-year-old age group, in which breast cancer occurred three times more frequently among former Pill users, according to the researchers. In addition, a reanalysis of data collected by the Centers for Disease Control supported an increase of breast cancer among a specific group of users: women who menstruated before the age of 13 and who had never borne children. Within that high-risk group, those who used the Pill for 12 years or more showed 12 times as much breast cancer as nonusers. That analysis, however, was based on just 20 women, a statistically minute sampling.

The new studies are vastly outnumbered by previous ones that gave contradictory results, said Dr. David Mutch, Barnes gynecologic oncologist. Dr. Mutch referred to at least a dozen earlier studies that demonstrated no link between Pill use and breast cancer, including a 1987 report in the *New England Journal of Medicine*.

Dr. Marvin Camel, gynecologist, also emphasized that there are multiple risk factors for breast cancer, many of them overlapping, and pointed out that the Pill has even proven beneficial in the prevention of endometrial and ovarian cancer. "The researchers themselves on these studies have acknowledged that their findings may be due to statistical or methodologic limitations," he said. "Also, the dosages the women were receiving were not specified, and today's pills have much lower levels of estrogen than those that were being prescribed in the '60s and '70s."

Dr. Virgil Loeb, oncologist and past president of the American Cancer Society, concurs that a cause-and-effect relationship is a murky area. "The studies of the Pill have been prompted by a search for the reason for the rise in the incidence of breast cancer. But delaying childbirth and having fewer children, a current trend, are recognized risk factors in breast cancer, since women are exposed to higher levels of estrogen during their reproductive years. It is reasonable to assume that many of these women who are delaying childbirth and limiting the number of children are using the Pill to accomplish this. That does not mean, however, that if a woman in this group develops breast cancer that it should be attributed to the Pill.

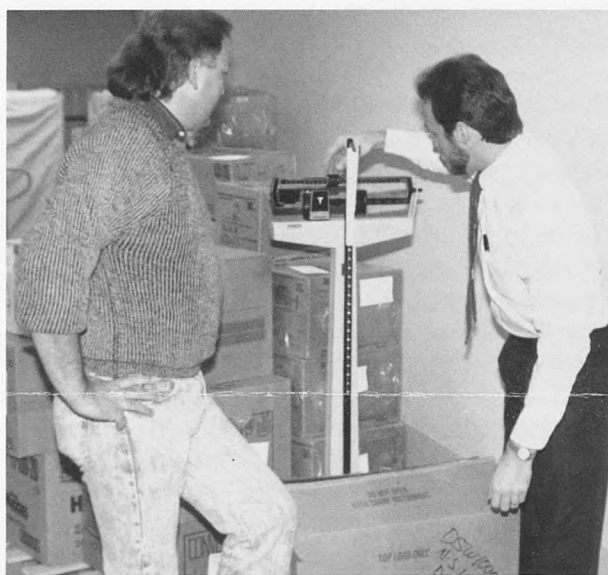
"It is inappropriate at this time to draw conclusions about the Pill based on a small study with acknowledged methodologic limitations. Research regarding breast cancer is continuing

in these and other areas, and women would be well advised to be aware of the recognized risk factors and to follow ACS guidelines for early detection," he added.

In addition to the two factors already cited by Dr. Loeb, risk factors for breast cancer include a family history of breast cancer, obesity and early menstrual onset. A high-fat diet also has been implicated as a risk factor in some studies.

The ACS urges all women over the age of 20 to examine their breasts for lumps every month. In addition, a professional breast examination is recommended every three years for those between the ages of 20 and 40 and annually over the age of 40. Screening mammograms are recommended once between the ages of 35 and 40; every two years for women between 40 and 49; and annually for women age 50 and over. Women with a family history of breast cancer are urged to begin screening at an earlier age.

Breast cancer is the second leading cause of death from cancer among U.S. women, claiming the lives of some 42,000 each year. Although the incidence has been rising, possibly due in part to earlier detection, the death rate has remained virtually the same.



Barnes St. Peters employees weigh medical supplies for shipping.

Barnes St. Peters aids Armenian quake victims

Barnes St. Peters Hospital donated nearly 3,000 individual medical supplies in December to help the victims of the earthquake in Soviet Armenia after the hospital received permission from the Food and Drug Administration (FDA). The supplies were shipped to New York City to the headquarters of a national relief effort coordinated by the Armenian Church of America. The earthquake struck Armenia on December 7.

The donated items were intravenous solutions and medications that can be used in a variety of situations, said Fred Woody, Barnes St. Peters administrator. Mr. Woody said relief coordinators had received large amounts of food and clothing, but medical supplies were in great demand.

"We were changing distributors and the items could not be used or returned," he said. "We felt this was a much better alternative for us."

The donated supplies included intravenous solutions used for dehydration, electrolyte imbalance and fluid replacement in patient care.

Mr. Woody added, "We are pleased to be able to contribute some assistance to the earthquake victims in Armenia."

New x-ray procedure offers hope for fertility

An innovative radiology procedure that improves the diagnosis and treatment of Fallopian disease is offering new hope for fertility to some 3.5 million infertile couples in the United States. Available at Barnes through Mallinckrodt Institute of Radiology with obstetrics and gynecology, the procedure enables more accurate assessment of tubal blockage, considered a major cause of female infertility.

Infertility is defined as the inability to conceive after one year of unprotected intercourse. It affects 15 percent of couples in the U.S. In one of every five affected females, a tubal factor will be found.

The new procedure, called selective ostial salpingography, improves assessment by first delivering a contrast agent via catheter directly into the Fallopian tube. After using x-ray to determine the extent of blockage, if any, an attempt can be made at the same time to clear the obstruction by feeding a guidewire through the catheter into the tube, a process called recanalization. The reopening of the tube or tubes then makes it possible for the egg and sperm to meet and for fertilization to occur.

The procedure, performed on an outpatient basis, is under the direction of Dr. Bruce McClennan, radiologist, and Dr. Jorge Pineda, obstetrician/gynecologist.

Construction begins on child care center

Initial construction activity began last month on Barnes' child care center, designed to provide developmental child care services for employees' children starting at age 6 weeks. The 10,500-square-foot center, with capacity for 152 children, will be located in the Barnes Clayton Avenue Building, just a few blocks east of the hospital.

The child care center will feature 11 classrooms staffed by qualified instructors and assistants to accommodate 40 infants under 24 months and 112 children 2 years and older. It will offer a pre-school program as well as a full-day kindergarten if there is sufficient need. A summer day camp for school-age children is also being considered. The center will be equipped with an outside playground, indoor recreational courtyard, a small kitchen area to be used for preschooler's baking activities, a small health room with cots for children who become ill during the day and a library of books and periodicals about child care for parents. The Clayton Avenue cafeteria will furnish meals and snacks for the children.

Planning of the child care center is under the direction of Marion Brown, former executive director of Hope Montessori Academies and Andrews Academy. According to Mrs. Brown, the emphasis at the center will be on providing a nurturing environment, building children's self-confidence levels and skills through developmental instruction and activities. The center will be licensed for day care by the Missouri Division of Family Services.

The center will be available exclusively to children of Barnes employees. Charges have not yet been finalized, but will be competitive with other area hospital-based child care centers. Payroll deduction, sometimes offering a pre-tax benefit, will be available. For more information about enrolling children in the center, call Mrs. Brown at (314) 362-0777.

One Year Later

Barnes St. Peters



Around-the-clock physician coverage in the ICU, under the direction of Dr. Hope Cranston (standing), has enhanced patient care.

Barnes "went west" just one year ago with the purchase of St. Peters Hospital, a 119-bed community hospital in suburban St. Charles County. The facility became the first acute care hospital added to the Barnes healthcare system, as part of a strategic plan calling for additional coverage of services to local and regional markets.

What has happened at the St. Peters hospital in its first year of Barnes ownership? Some of the highlights are featured here.

The hospital officially became known as Barnes St. Peters Hospital on June 1, 1988. With the name change, Barnes St. Peters also adopted the new Barnes corporate identity plan. By mid-October, new signage bearing the Barnes name was installed on the hospital campus, including a 45-foot illuminated sign visible from Interstate 70.

Patient care at Barnes St. Peters was enhanced in July with the addition of around-the-clock physician coverage in the hospital's intensive care unit. Intensivists now oversee the care and

treatment of patients in the ICU, under the leadership and supervision of Dr. Hope Cranston, medical director of the unit.

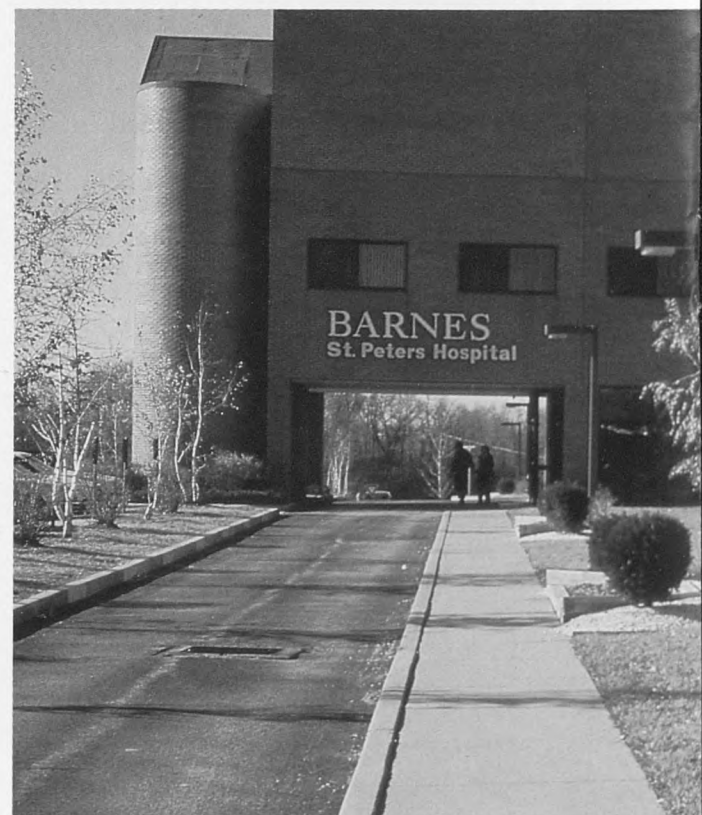
Barnes Home Health opened a branch office in St. Peters in June in the medical center building on the hospital grounds. A staff of approximately 20 Barnes Home Health employees, including nurses, home health aides, a medical social worker and a nursing supervisor now provide home care services for the Barnes St. Peters community. The St. Peters branch serves patients in St. Charles, Lincoln, Warren and portions of north and west St. Louis Counties.

Suite Beginnings, the unique family-centered maternity program at Barnes St. Peters, recently observed its first birthday as a "suite success." A total of 506 babies were born at the hospital during the full year of operation. Suite Beginnings is exclusive in St. Charles County, offering today's parents comfortable, hotel-like surroundings, where labor, delivery, recovery and postpartum care all take place in the same room. The hospital celebrated the special anniversary last month by hosting a reunion birthday party and open house.

Equipment needs have been continually assessed at Barnes St. Peters, in order to keep the hospital up-to-date with advanced technology and to improve patient care. In September,



New mothers like Tina Hargove, with newborn son Phillip, can attest to the success of "Suite Beginnings," the hospital's family-centered maternity program.



New signage incorporating the Barnes relationship was installed.

St. Peters

a new chemistry analyzer was added to the hospital laboratory, to increase the number of test capabilities in-house. Called a Stratus instrument, the highly accurate immunoassay system offers additional lab procedures in a more cost-effective manner by reducing test turnaround time.

In late autumn, a new cardiac imaging system was in place in the EKG area of the Barnes St. Peters cardiopulmonary department. The 2-D echocardiography machine with color flow mapping added cardiac doppler studies and stress echocardiography capabilities to the cardiology services offered at Barnes St. Peters. The color flow doppler uses ultrasound to provide more information about the patient's heart, and stress echo testing gives cardiologists pictures of the heart muscle and valves, helping to detect any abnormalities. This state-of-the-art equipment also is exclusive in St. Charles County.

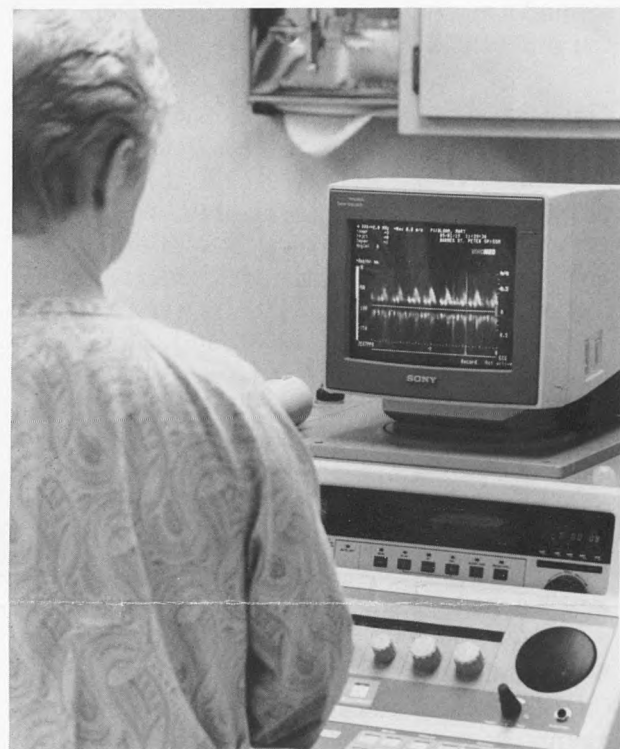
The Optifast weight management program continued to grow at a rapid rate at Barnes St. Peters. Patient numbers increased more than 75 percent in 1988 when compared to 1987 figures, with a total of 344 patients enrolled in the program at year's end. The national publicity received by the program introduced many persons to the physician-supervised weight loss method, and resulted in record numbers par-

ticipating in Optifast orientation sessions at Barnes St. Peters.

In December, the hospital assumed internal control of its chemical dependency and stress management programs, previously contracted through the Stress Center of St. Charles County. Changes in the healthcare and insurance industries prompted Barnes St. Peters to operate and manage its own programs. The services were renamed the Barnes St. Peters Foundations Program, to project a caring image of building stronger foundations for brighter tomorrows.

Barnes St. Peters Hospital also has reached out to the communities it serves. Community education programs and health screening services such as Countdown USA, the S.M.A.R.T. mammography screening, "Ask the Doctor" seminars and free blood pressure screenings have helped introduce area residents to the new Barnes St. Peters Hospital over the last several months.

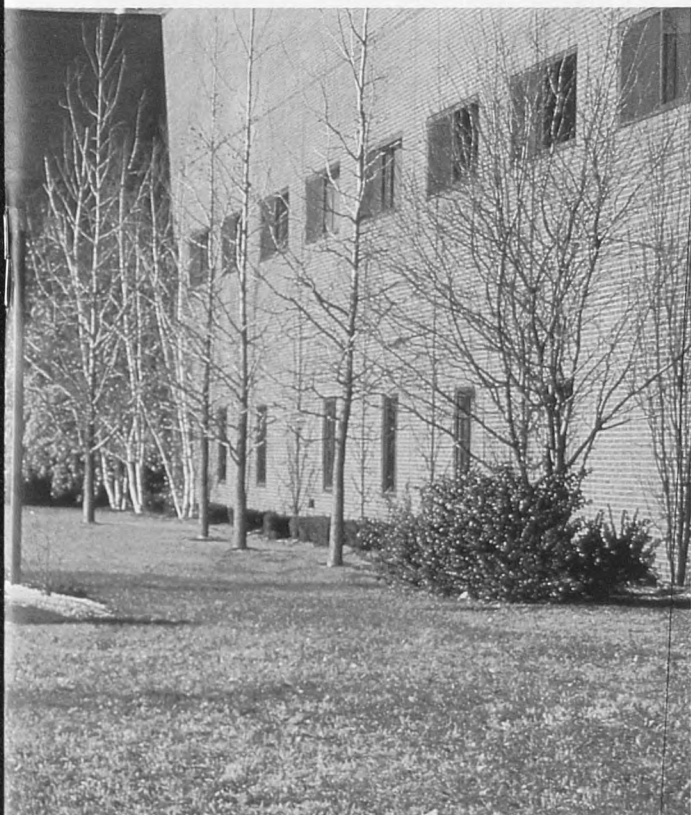
*Story by Dave Nowak
Barnes St. Peters Hospital*



New imaging equipment adds cardiac doppler and stress echocardiography capabilities to the hospital's cardiology services.



Laboratory supervisor Judi Frost demonstrates the hospital's chemistry analyzer, which has helped increase the number of in-hospital test capabilities.



Installed by mid-October 1988.

Media spotlight

As a national leader in patient care and medical research, Barnes serves as an information resource center. During 1988, more than 1,200 queries from broadcast and print media representatives were made to the public relations department requesting that Barnes medical and professional staff explain current healthcare concerns and discoveries. Highlights of the media's coverage of Barnes during the last month include the following:

The one-year anniversary of **Cynthia Conrad's liver transplant** was cause for celebration and news coverage on KMOV-TV December 10. Transplant surgeon Dr. **Douglas W. Hanto** explained Mrs. Conrad's unique case to reporter Al Wiman: Late in pregnancy in 1987 she developed a rare liver complication. After a Caesarean birth, her own liver failed and she received a transplant. One year later she celebrated her new life and the first birthday of son Christopher. Cake, candles and a run around a jogging track, by Mrs. Conrad, marked the milestone.

The **cost effectiveness of medical technology** was analyzed in a *St. Louis Post-Dispatch* series December 18-20. Dr. **James L. Cox**, cardiothoracic surgeon-in-chief, explained how heart arrhythmia surgery, made possible by computer mapping of the heart's electrical circuitry, can result in a perfectly healthy heart and relieve the patient of a debilitating drug regimen. Dr. **Ralph V. Clayman**, urologist, explained how shock-wave lithotripsy is used in place of surgery to treat kidney stones, reducing a week-long hospital stay to an outpatient procedure.

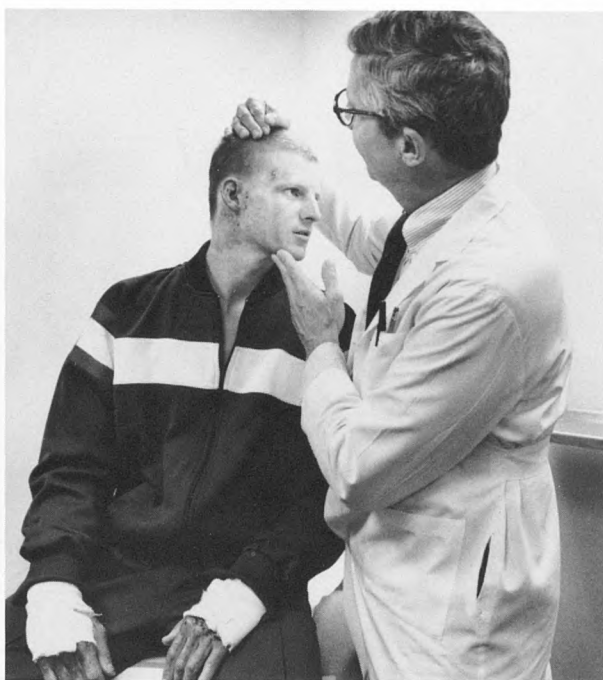
Dr. **Virgil Loeb Jr.**, oncologist, called for **wider use of mammography** in a story in the *St. Louis Post-Dispatch* December 21. Dr. Loeb said only 5-10 percent of women follow the American Cancer Society guidelines for getting regular mammograms.

Lung transplantation was discussed by Dr. **Joel D. Cooper**, head, section of thoracic surgery, in a *St. Louis Post-Dispatch* story December 25. Dr. Cooper said lung transplants offer hope for patients who are in the end stages of respiratory disease. Reporter Roger Signor also profiled lung recipient Nancy Foerderer who today briskly walks two miles from her apartment in the Central West End to Barnes for follow-up care.

Dr. **J. William Campbell**, infectious disease specialist, updated KMOX Radio's audience December 29 about **AIDS** in an "At Your Service" program.

Actor Gary Busey received a **head injury** in a motorcycle accident and prompted an interview with nurse specialist **Kathy Kater** on KMOX Radio January 3. Mrs. Kater, a neurology and head trauma nurse specialist, said the severity of injury in motorcycle accidents can be reduced by wearing a helmet. Mr. Busey has campaigned against helmet laws.

Advice for **post-holiday weight control** was given by Dr. **Robert J. Saltman** and **Karen Pekin**, registered dietitian, January 3 on KMOV-TV. A series on "liquid diets" on KSDK-TV January 9-11 included interviews with Dr. **Stephen R. Crespin** and Dr. **John S. Daniels**. Dr. Crespin favors traditional diets for long-term weight control and discourages patients from trying the liquid diet products. Dr. Daniels finds the liquid diet products to be helpful for a select group of patients.



Dr. William Monafo examines Scott, whose determination "has made a significant difference in his recovery."

Hard work pays off for survivor of explosion

Scott Mook will always be thankful he knew one basic tenet of burn safety: stop, drop and roll. That knowledge and subsequent burn treatment at Barnes Hospital have put him among the few survivors of a fiery propane explosion on a Memphis, Tennessee, interstate. The explosion, which killed nine people, occurred just two days before Christmas when a truck carrying 10,000 gallons of propane hit an overpass, igniting an explosion that engulfed six other vehicles and a cluster of nearby homes.

A 20-year-old University of Missouri—Columbia student, Scott was in the Memphis area working for an uncle during the Christmas break. He had been driving in his pickup truck in the opposite direction of the propane tanker when the accident occurred. He managed to stop his truck, just moments before the propane exploded. Scott immediately ran from the truck and rolled in the nearby grass until a bystander told him his flames were extinguished. Scott then tried to assist other victims of the accident by smothering flames with pieces of clothing.

At the time, Scott had no idea of the severity of his own injuries, second degree burns over 27 percent of his body. "It was like a war zone," he recalled. "I didn't really have any idea what was happening. I thought maybe a gas station had exploded or something. I just thought I should help."

A Sullivan, Missouri, native, Scott was transferred to Barnes for burn treatment from Regional Medical Center in Memphis five days after the accident. Burned on his face, arms, hands and back, Scott is undergoing skin grafting. Grafting is used to replace the skin in areas so severely damaged that skin will not grow back. With the help of intensive occupational therapy in the hospital and his determination, he is expected to regain full mobility in his upper body.

Shirley Johnson, head nurse on the division where he is receiving treatment, credits Scott in great part for his progress.

"His attitude toward treatment has made a significant difference in his recovery," she added. "He is a model patient, very compliant with what we have to ask him to do, even though treatment can be very painful for him. Scott also has maintained his sense of humor, and it is a joy to work with him. It's very rewarding to work with Scott, from both a professional and personal standpoint."

The next issue of Bulletin will be published April 1.

Community calendar

Wednesday, February 15

Diabetes dietary tips will be the subject of the next talk in Barnes' spring diabetes lecture series at 7 p.m. at the Thornhill Branch Library, 12863 Willowick Dr. in west St. Louis County. Barnes registered dietitians Karen Pekin and Anne Renfro will discuss how to adhere to the proper diet whether dining by candlelight or cruising through the drive-through. Call (314) 362-1390 to register for the free program.

Wednesday, February 22

Strokes will be the subject of this month's free "Ask the Doctor" program at 7 p.m. in Barnes' East Pavilion Auditorium. Dr. William Powers, neurologist, will be the featured speaker. Call (314) 362-5290 to register. Free parking is provided in the subsurface garage.

Wednesday, March 1

Hip replacement surgery will be the topic of the March "Ask the Doctor" seminar at 7 p.m. Dr. Robert Kuhlman, orthopedic surgeon, will discuss the latest advances, when such surgery is needed and who is a candidate for surgery. The free program will be held in Barnes' East Pavilion Auditorium. Call (314) 362-5290 to register.

Tuesday, March 7

Male impotency is the topic of a monthly series of free, informal discussions hosted by Dr. John Daniels, male diagnostic specialist, at 7 p.m. in the East Pavilion Auditorium. The program includes a videotape and printed materials as well as a time for individual questions and answers. Attendance is limited to allow ample time for discussion, and advance registration is required. Call (314) 362-5290.

Hospital notes

Dr. **Barry A. Siegel**, Barnes radiologist and director of nuclear medicine at Mallinckrodt Institute of Radiology, received a one-year grant from the Edward Mallinckrodt Jr. Foundation for research using positron emission tomography (PET) to establish a basis for clinical evaluations for patients with advanced coronary artery disease. Co-investigators for the research are radiologists Dr. **Mark A. Mintun**, and **Robert J. Gropler**.

Dr. **Gary Quick**, emergency department medical director, was recently named to serve on the Missouri Chapter of the American College of Emergency Physicians Educational Committee.

The newly published resource text, *Current Perinatology*, contains a chapter co-authored by **Kathy Hanold**, R.N., director of women and infants services. The chapter discusses the use of transcutaneous nerve stimulation in the first stage of labor.

Dr. **Saulo Klahr**, renal specialist, was elected president of the National Kidney Foundation at the organization's annual meeting in San Antonio, Texas, last month.

Five Barnes surgeons will serve as the host faculty for a symposium on aesthetic and reconstructive breast surgery March 9-11: Dr. **Samuel Wells Jr.**, Barnes surgeon-in-chief; Dr. **Robert Kuske**, radiologist; and Drs. **Leroy Young**, **Jeffrey Marsh** and **Bruce Kraemer**, plastic and reconstructive surgeons.

Gifts to Barnes Hospital Funds

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